

L14 000178276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

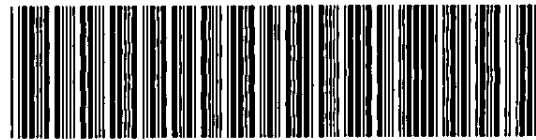
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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NOV 17 2014  
DEPARTMENT OF STATE  
SECRETARY OF STATE  
SUZUKI  
2014 NOV 17 PM 4:19  
TO: KENNETH F. FUDGE  
SUFFICIENT OF FILING

FILED  
2014 NOV 17 AM 9:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 18 2014  
T CLINE

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-205-8842

3541 FLAMINGO DRIVE, LLC


- Nonprofit
- Domestic Corporation
- Limited Partnership
- LLC
- Formation**
- Certified Copy
- Formation**
- Walk In
- Mail Out

- Amendment
- Dissolution/Withdrawal
- Reinstatement
- Annual Report
- Name Registration
- Fictitious Name
- Photocopies
- Will Wait

- Merger
- Mark
- Other
- CUS
- After 4:30
- Pick Up

Name \_\_\_\_\_  
 Availability \_\_\_\_\_ 11/17/2014  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_ **KM**  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

Order#: \_\_\_\_\_  
**9347170**  
 Ref#: \_\_\_\_\_  
 Amount: \$ \_\_\_\_\_

2014 NOV 17 PM 05  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

3541 Flamingo Drive, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

248 Bal Bay Drive  
Bal Harbour, FL 33154

248 Bal Bay Drive  
Bal Harbour, FL 33154

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

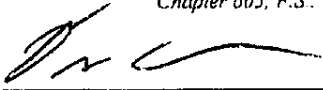
The name and the Florida street address of the registered agent are:

Oren Alexander  
Name

248 Bal Bay Drive  
Florida street address (P.O. Box **NOT** acceptable)

Bal Harbour, FL 33154  
City Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.*

X   
Registered Agent's Signature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 MAY 17 AM 9:05

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member "MGR" = Manager AMBR _____	Oren Alexander 248 Bal Bay Drive Bal Harbour, FL 33154
AMBR _____	Tal Alexander 248 Bal Bay Drive Bal Harbour, FL 33154
AMBR _____	Alon Alexander 248 Bal Bay Drive Bal Harbour, FL 33154
_____	_____
_____	_____

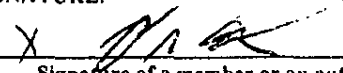
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 TALLAHASSEE, FLORIDA  
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.  
The percent ownership interest of the initial members is as follows:  
Oren Alexander 33.33%, Tal Alexander 33.33% and Alon Alexander 33.33%

**REQUIRED SIGNATURE:**

X  \_\_\_\_\_

Signature of a member or an authorized representative of a member.  
 (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Oren Alexander  
 Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

**CT Corporation System**

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**3541 FLAMINGO DRIVE, LLC**


Nonprofit

Domestic Corporation

Limited Partnership

LLC

**Formation**

Certified Copy

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Name Registration

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Photocopies

Will Wait

Merger

Mark

Other

CUS

After 4:30

Pick Up

Name \_\_\_\_\_

Availability \_\_\_\_\_

Document \_\_\_\_\_

Examiner \_\_\_\_\_

Updater \_\_\_\_\_

Verifier \_\_\_\_\_

W.P. Verifier \_\_\_\_\_

11/17/2014

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